

VAX FACTS

October 2017

Educational Events:

The CDC has released <u>Vaccine Administration e-Learn</u>. This is a free, interactive, online educational program that serves as an introductory course or refresher on vaccine administration. The self-paced e-Learn offers a certificate of completion and/or Continuing Education (CE).

Although this does not meet NCIP annual training requirements, it is a very worthwhile opportunity to enhance your learning. Training requirements for the Vaccine Coordinator and Back-Up can be met by completing the You Call the Shots VFC Module and Storage and Handling Module.

Important Reminders:

- Annual provider vaccine agreements are coming soon. Be sure to submit them on time to prevent delays in ordering.
- January 1, 2018

 All providers must use continuous temperature monitoring devices (data loggers) within storage units that store vaccines.

Clinician's Corner



Flu season is here! Make sure your office is up to date on the latest products and recommendations. EZIZ.org has released the 2017–18 Influenza Vaccine Identification Guide.

Routine annual influenza vaccination of all persons aged ≥6 months without contraindications is recommended. Some children aged 6 months through 8 years may require 2 doses separated by ≥4 weeks.

Children aged 6 through 35 months may receive one of two products at the appropriate volume for each dose needed: 0.5 mL FluLaval® Quadrivalent (containing 15 μ g of HA per vaccine virus) or 0.25 mL Fluzone® Quadrivalent (containing 7.5 μ g of HA per vaccine virus). **These are the only two influenza vaccine products licensed for this age group.**

The Advisory Committee on Immunization Practices recommends that all women who are pregnant or who might be pregnant in the influenza season receive influenza vaccine. The vaccine can be administered at any time during pregnancy, before and during the influenza season.

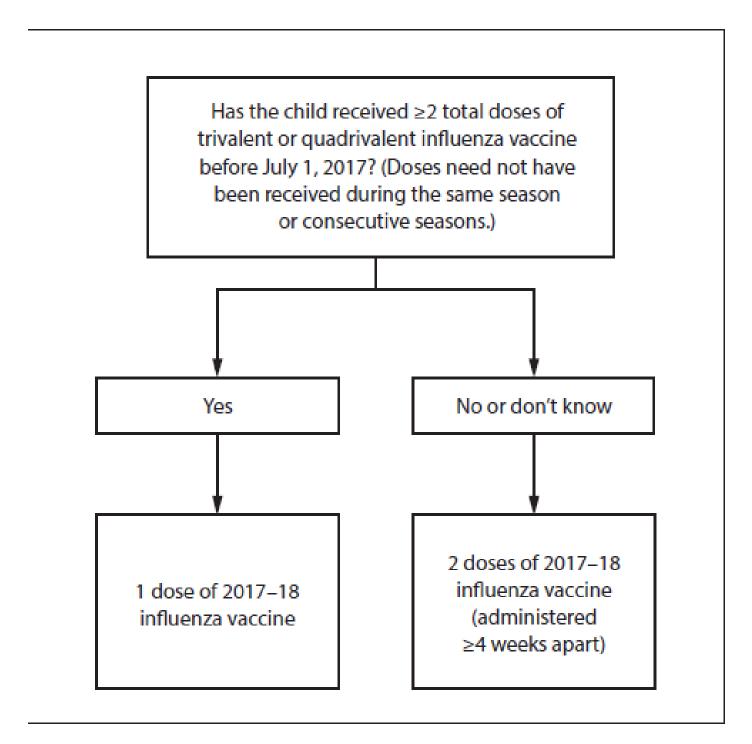
Flu vaccine may be administered simultaneously with other vaccines.

ACIP does not recommend that LAIV4 be used during the 2017–18 season for any population.

CDC MMWR: Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2017–18 Influenza Season. August 25, 2017

The <u>Coverage Criteria</u> has changed! Be sure to print a copy for your office.

Influenza vaccine dosing algorithm for children aged 6 months through 8 years — Advisory Committee on Immunization Practices, United States, 2017–18 influenza season



Compliance Component

There are two types of meningococcal vaccines. The first is Meningococcal Conjugate vaccine, tradenames (Menveo® and Menactra®) and the second is serogroup B meningococcal vaccines, tradenames (Bexsero® and Trumenba®)

CDC recommends vaccination of all 11 to 12-year olds with a meningococcal conjugate vaccine (Menactra® or Menveo®), followed with a booster dose of meningococcal conjugate vaccine at 16 years of age. NC immunization law requires two doses of Meningococcal Conjugate Vaccine, either (Menveo® or Menactra®). One dose is required for individuals entering the seventh grade or by 12 years of age, or whichever comes first, on or after July 1, 2015. A booster dose will be required for individuals entering the 12th grade or by 17 years of age, or whichever comes first beginning on August 1, 2020. If the first dose is administered on or after the 16th birthday, a booster dose is not required. Individuals born before January 1, 2003 shall not be required to receive meningococcal conjugate vaccine.

All adolescents and young adults (16 through 23 years old) **may** also be vaccinated with a serogroup B meningococcal vaccine, preferably at age 16 through 18 years, so they have protection during the ages of increased risk. However, CDC recommends that certain adolescents and young adults **should** be vaccinated with a serogroup B meningococcal vaccine if they are at increased risk because of exposure to a serogroup B meningococcal disease outbreak or people with certain medical conditions. This Category B recommendation allows the clinician to make a Men-B recommendation based on the risk and benefit for the individual patient.

Remember: serogroup B meningococcal vaccine is administered in addition to Meningococcal vaccine, not in replacement of it.

http://www.immunize.nc.gov/schools/k-12.htm https://www.cdc.gov/vaccines/vpd/mening/public/index.html

NCIR News to Use

The 2 dose HPV schedule recommendation is now available in NCIR!



ACIP recommends a routine 2 dose HPV schedule for adolescents who start the series before the 15th birthday. The 2 doses should be separated by 6-12 months. The minimum interval between doses is 5 calendar months.

A 3 dose HPV schedule is recommended for adolescents who start the series on or after the 15th birthday and for people with certain immunocompromising conditions. The minimum interval between the 1st and 2nd dose is 4 weeks. The minimum interval between the 2nd and 3rd is 12 weeks. The minimum interval between the 1st and 3rd dose is 5 calendar months.

Storage and Handling Segment

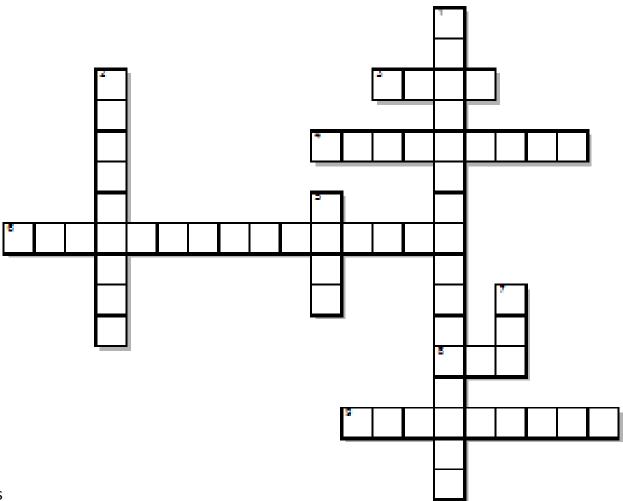
With the recent hurricanes and other natural disasters, now is the perfect time to update your <u>emergency response plans</u>!

Follow the <u>transport guidance</u> in the event you need to move your vaccine to another facility.

Make sure to place new batteries in your data logger in the event of a power outage.

Please use your best judgement and most importantly stay safe!

Test Your Knowledge



Across

- 3 The number of calendar months between the 1st and 3rd dose of HPV for adolescents 15 years of age and older
- 4 Any temperature reading outside the recommended range for vaccine storage is a temperature _____ and must be reported to the storage and handling line
- 6 MenB vaccines are not ______
- 8 Number of doses of flu vaccine children 6 months through 8 years of age may need
- 9 Refer to this plan in the event of a power outage or natural disaster

Down

- Use this tool to help determine VFC eligibility
- 2 This vaccine is recommended for everyone 6 months of age and older without contraindications
- 5 This vaccine is given in addition to meningococcal vaccine, not in replacement of it
- 7 Number of doses of HPV routinely recommended for adolescents that start the

3A-five; 4A-excursion; 6A– interchangeable; 8A-two; 9A-emergency; 1D-coverage criteria; 2D-influenza; 5D-MenB; 7D-two